

10/11/01

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A/Reissue

PTO/SB/50 (02-01)

Approved for use through 01/31/2004. OMB 0651-0033

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REISSUE PATENT APPLICATION TRANSMITTAL

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Attorney Docket No.

448563/0046

First Named Inventor

Seiichi Hirano, et

Original Patent Number

6,027,204

Original Patent Issue Date
(Month/Day/Year)

02/22/2000

Express Mail Label No.

EL911520810US

APPLICATION FOR REISSUE OF:

(Check applicable box)

☒

Utility Patent

☐

Design Patent

☐

Plant Patent

APPLICATION ELEMENTS (37 CFR 1.173)

ACCOMPANYING APPLICATION PARTS

- ☒ Fee Transmittal Form (PTO/SB/56)
(Submit an original, and a duplicate for fee processing)
- ☐ Applicant claims small entity status. See 37 CFR 1.27.
- ☒ Specification and Claims in double column copy of patent format (amended, if appropriate)
- ☒ Drawing(s) (proposed amendments, if appropriate)
- ☒ Reissue Oath/Declaration (original or copy)
(37 C.F.R. § 1.175) (PTO/SB/51 or 52)
- ☒ Power of Attorney
- Original U.S. Patent currently assigned? ☒ Yes ☐ No
(If Yes, check applicable box(es))
 - ☒ Written Consent of all Assignees (PTO/SB/53)
 - ☒ 37 C.F.R. § 3.73(b) Statement (PTO/SB/96)
- ☐ CD-ROM or CD-R in duplicate, Computer Program (Appendix) or large table
- Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all of the following are necessary)
 - a. ☐ Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. ☐ CD-ROM (2 copies) or CD-R (2 copies); or
 - ii. ☐ paper
 - c. ☐ Statements verifying identity of above copies

- ☒ Statement of status and support for all changes to the claims. See 37 CFR 1.173 (c).
- ☐ Original U.S. Patent for surrender
 - ☐ Ribbonded Original Patent Grant
 - ☐ Statement of Loss (PTO/SB/55)
- ☒ Foreign Priority Claim (35 U.S.C. 119)
(if applicable)
- ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
- ☐ English Translation of Reissue Oath/Declaration
(if applicable)
- ☒ Preliminary Amendment
- ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
- Other: Certificate of Mailing by
"Express Mail"

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NAME (Print/Type)	Steven B. Pokotilow	Registration No. (Attorney/Agent)	26,405
Signature	<i>ABP</i>	Date	10/11/2001

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REISSUE APPLICATION FEE TRANSMITTAL FORM						Docket Number (Optional) 448563/0046		
Claims as Filed - Part 1								
Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
				Rate	Fee	Rate	Fee	
(A) 23	Total Claims (37 CFR 1.16(j))	(B) 23	**** 0 =	x \$ _____ =	or	x \$ 18 =		
(C) 6	Independent claims (37 CFR 1.16(i))	(D) 6	* 0 =	x \$ _____ =		x \$ 81 =		
Basic Fee (37 CFR 1.16(h))						\$ _____		\$ 740.00
Total Filing Fee					\$ _____	OR	\$ 740.00	
Claims as Amended - Part 2								
	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	*** 35	MINUS	** 23	* = 12	x \$ 0 =		x \$ 18 =	\$ 216.00
Independent Claims (37 CFR 1.16(i))	*** 6	MINUS	***** 9	= 3	x \$ 0 =		x \$ 84 =	\$ 252.00
Total Additional Fee					\$ _____	OR	\$ 468.00	
<p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims.</p> <p>**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p>								
<p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input checked="" type="checkbox"/> Please charge Deposit Account No. <u>19-4709</u> in the amount of <u>\$1208.00</u>. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. <u>19-4709</u>. A duplicate copy of this sheet is enclosed.</p> <p><input type="checkbox"/> A check in the amount of \$ _____ to cover the filing / additional fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p>								
<p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p>								
<p>10/11/2001</p> <p>_____ Date</p>				<p> _____ Signature of Applicant, Attorney or Agent of Record</p> <p>Steven B. Pokotilow, Reg. No. 26,405 _____ Typed or printed name</p>				

CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10)Applicant(s): **Seiichi Hirano et al.**

Docket No.

448563/0046

Serial No.

08/834,151

Filing Date

October 11, 2001

Examiner

M. Brooke

Group Art Unit

2108

Invention:

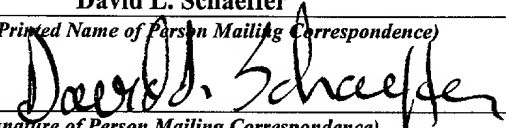
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I hereby certify that the following correspondence:

Reissue Patent Appln. Transmittal; Reissue Appln. Fee Transmittal Form; Reissue Appln. Decl. By the Inventors (4 pgs.); Reissue Appln. Decl. by the Assignee (3 pp.) Statement Under 37 CFR 3.73(b)(1 p.); Reissue Appln. Consent of Assignee; Statement of Status and Support for All Changes to the Claims; Foreign Priority Claim and Preliminary Amendment (10 pp.); Copy of U.S. Pat. No. 6,027,204; 54 Sheets Drawings; Return Postcard

(Identify type of correspondence)

is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 in an envelope addressed to: The Assistant Commissioner for Patents, Washington, D.C. 20231 on

October 11, 2001*(Date)***David L. Schaeffer***(Typed or Printed Name of Person Mailing Correspondence)*
*(Signature of Person Mailing Correspondence)***EL911520810US***("Express Mail" Mailing Label Number)***Note: Each paper must have its own certificate of mailing.**